12 - 26 - 07 - PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSOE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-145

or Fax (571)-273-2885

ppropriate All further	correspondence includired below or directed other	no the Patent, advance o	rders and notification of n	naintenance fees w	rill be mailed to the current	correspondence address as
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
20874	7590 09/24	1/2007		is own continues.	ر در	
250 SOUTH CL SUITE 300	INTON STREET	SIAK & SULLIVA	being	by certify that this Fee(s deposited with the US P sufficient postage as Exp	s) Transmittal is in an envelope a	ddressed to Issue Fee on the
SYRACUSE, N	Y 13202	Express Mail Label No. EM1	88601725US	arbara A.	Saltaman	(Depositor's name)
			<u> </u>	ho.	Mito	(Signature)
			16		1 2007	(Date)
			LB6	ecember 2	1, 2007	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/664,581	09/17/2003		Charles E. Biss		283-381	3675
•	: APPARATUS AND M	METHOD FOR VERIFYI	NG PRINT QUALITY OF	AN ENCODED IN	IDICIUM	
TILL OF HAVEIAGE	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
	•		·	T		
APPLN. TYPĖ	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE	E FEE TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$0	\$0	\$1400	12/24/2007
EXAMINER ART UNIT		ART UNIT	CLASS-SUBCLASS	12/27/2007 MGEBREM2 080800325 500289 10664581		
ST CYR, DANIEL 2876		235-472010				
. Change of correspondence address or indication of "Fee Address" (37			2. For printing on the p	ng on the patent front page stiss 6.00 DA		
CFR 1.363).			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.						
"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.						
<u>.</u>		A TO BE PRINTED ON	THE PATENT (print or type	ne)		
PLEASE NOTE: Unl	less an assignee is ident	rified below, no assignee	data will appear on the pa	atent. If an assign	ee is identified below, the o	document has been filed for
recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)						
Hand Held Products, Inc. Skaneateles Falls, NY 13153						
						·
lease check the appropr	iate assignee category or	r categories (will not be p	rinted on the patent):	Individual XXCo	orporation or other private gr	oup entity Government
a. The following fee(s)	are submitted:	4		ise first reapply ar	ny previously paid issue fec	shown above)
Issue Fee			A check is enclosed.			
	lo small entity discount	permitted)	Payment by credit card. Form PTO-2038 is attached.			
Advance Order - # of Copies2			XIX The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 0 – 0 2 8 9 (enclose an extra copy of this form).			
Change in Entity Sta	tus (from status indicate				,	
	s SMALL ENTITY stat		☐ b. Applicant is no lon	ger claiming SMAI	LL ENTITY status. See 37 C	CFR 1.27(g)(2).
NOTE: The Issue Fee an	d Publication Fee (if req		ed from anyone other than t			he assignee or other party in
Authorized Signature	<u> </u>	Bloi		Date Dec	ember 21, 200)7
Typed or printed nam	e George S	. Blasiak		Registration N	lo. <u>37,283</u>	
his collection of inform n application. Confiden	nation is required by 37 (tiality is governed by 35	CFR 1.311. The information U.S.C. 122 and 37 CFR	on is required to obtain or a 1.14. This collection is est	retain a benefit by t timated to take 12 i	he public which is to file (arminutes to complete, includi	d by the USPTO to process) ng gathering, preparing, and

submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.